



CITY OF WASHINGTON
OFFICE OF THE CITY CLERK
55 WEST MAIDEN STREET
WASHINGTON, PA 15301
Email: jdonatelli@washington.gov
PHONE: (724) 225-2785



FENCE PERMIT \$20.00

Please make checks payable to the City of Washington

DATE: _____

OWNER NAME: _____

PHONE NUMBER: _____ EMAIL: _____

PROPERTY ADDRESS FOR PERMITTED WORK: _____

Property Owner Address: Same as location of property

Address if different than location of property listed above:

CONTRACTOR (IF APPLICABLE) _____

CONTRACTOR PHONE: _____ EMAIL: _____

TYPE OF FENCE:

WIRE

PICKET

STOCKADE

RESIDENTIAL

BUSINESS

MANUFACTURING

SIGNATURE OF APPLICANT: _____

ZONING OFFICER: _____

Please remit payment with applications to City of Washington City Hall 55 West Maiden Street Washington, PA 15301